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|---|---|--|-----------------|-------------------------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 960296.97711 | | |
| | In re Application of Michael N. Gould | | | |
| | Application Number 10/014,724 | | | Filed 11/7/2001 |
| | For MONOTERPENES AND SESQUITERPENES AS CHEMOTHERAPEUTIC SENSITIZERS AND RADIATION | | | |
| | Art Unit 16 | 16 | Examiner | Dameron Jones |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | |
| The requested extension and appropriate non-small-entity fee are as follows (check time period desired): | | | | |
| One month (37 CFR 1.17(a)(1)) | | | | \$ |
| Two months (37 CFR 1.17(a)(2)) | | | | \$ |
| ✓ Three months (37 CFR 1.17(a)(3)) | | | | \$ 980.00 |
| | | | | \$ |
| ☐ Four months (37 CFR 1.17(a)(4)) | | | | \$ |
| ☐ Five months (37 CFR 1.17(a)(5)) | | | | |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 490.00 | | | | |
| A check in the amount of the fee is enclosed. | | | | |
| | | | | |
| ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Commissioner has already been authorized to charge fees in this | | | | |
| application to a Deposit Account. | | | | |
| The Commissioner is hereby authorized to charge any fees which may be required, | | | | |
| or credit any overpayment, to Deposit Account Number17-0055 | | | | |
| I have enclosed a duplicate copy of this sheet. | | | | |
| I am the applicant/inventor | | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | |
| attorney or agent of record. | | | | |
| attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). | | | | |
| | | | | · |
| WARNING: Information on this form may become public. Credit card information should not | | | | |
| be included on this form. Provide credit card information and authorization on PTO-2038. | | | | |
| October 5, 2004 | | Jane | - 0 | sled |
| Date | | / \ Signa | ture | |
| (414) 277-5709 | | Jean C. Baker | | |
| Telephone Number | | Typed or pri | nted nam | e |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | |
| Total of 1 farms are submitted | | | | |

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case.